

2023 – 2024 Psychology Doctoral Internship Program

VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Eastern Oklahoma VA Health Care System

MATCH Number Program Code: 242611

Pease visit our [website](#).

EASTERN OKLAHOMA VA HEALTH CARE SYSTEM



Eastern Oklahoma VA Health Care System (EOVAHCS) is a comprehensive medical system serving nearly 50,000 Veterans from 25 counties in Eastern Oklahoma, also known as “Green Country.” The Jack C. Montgomery (JCM) VA Medical Center in Muskogee is proud of being the first VA Medical Center in the nation named after a Native American. Jack C. Montgomery, a Medal of Honor recipient, served in World War II and was a member of Cherokee Nation. The large Community-Based Outpatient Clinic (CBOC) in Tulsa is also named after a Native American, Medal of Honor recipient and Creek Nation Citizen, Ernest Childers. The internship training program is primarily located in Tulsa, however, some rotations require time in Muskogee. Our motto is “Excellence Starts Here” and we strive to embody ICARE Values of Integrity, Commitment, Advocacy, Respect and Excellence in all we do.

The JCM Medical Center in Muskogee, Oklahoma provides 24 hour service through the emergency department and hospital wards including a 16 bed acute psychiatric unit. Another Muskogee site is the East Behavioral Medicine Clinic which offers outpatient based services for Women Veterans, Veterans who have experienced sexual trauma (MST or sexual trauma outside of military), PTSD clinical team (PCT), substance use services (SUD), and general mental health (GMH). The Intensive Community Mental Health Recovery Service Range (ICHMRS) program is also based out of this location. ICHMRS serves rural Veterans with severe mental illness in their homes.

In July of 2021 EOVAHCS proudly opened a brand new, world class Ernest Childers VA Outpatient Clinic in South Tulsa at 91st and Mingo. With over 180,000 thousand square feet, 22 acres and ample parking, the clinic also has retail store and food court. The clinic offers services including primary care, primary care mental health integration, chemotherapy and endoscopy. The clinic also houses behavioral health services

including general mental health teams, substance use disorder team, and the Psychosocial Rehabilitation and Recovery Center (PRRC).



In addition to the Ernest Childers Clinic, behavioral medicine will continue to use space in Tulsa at Eleventh Street and Hwy 169 in east Tulsa. The second floor of the building contains the Women's/Sexual Trauma Team, PTSD Clinical Team, ICHMERS, and the Homeless Outreach Team. Psychology Intern Training and Didactic Lecture series will be located at Eleventh Street. Psychology Interns will most likely spend time at both Tulsa locations and in Muskogee over the course of their training year.

In addition to Muskogee and Tulsa sites we offer a range of services to Veterans at community-based outpatient clinics located in McAlester, Idabel and Vinita with plan of transitioning the Vinita clinic to Claremore and opening a new clinic in Bartlesville Oklahoma.

TULSA LIVING



Tulsa is the second largest metropolitan area in Oklahoma with a population just shy of 400,000. Cultural influences include Native American culture, the oil & gas boom and resulting Art Deco Architecture of the 1920's, a renowned music scene, art museums, urban wilderness areas and miles of running/cycling trails. Our newest large attraction is the Gathering Place, a 66 acre park on the east bank of the Arkansas River. The park includes sport courts, a boathouse with boat rentals, splash playground, wetland pond and garden, trails and playgrounds for every developmental level. We have a small but efficient International Airport. A range of faith and a-theist communities can be found in the area including churches, synagogues, mosques and the atheist community of Tulsa.

The cost of living is very affordable in Tulsa (Overall cost of living index is 83.2) which is helpful for interns on a stipend who want to enjoy the amenities of a large metro area. Average rent for a 2 bedroom apartment in the Tulsa metro is approximately \$1,000 per month and studio apartments can be found in the \$500-800 range. Tulsa is surrounded by suburbs which have been named in the top 10 best places to live in Oklahoma with A rated school districts; These include Jenks, Bixby, Broken Arrow and Owasso. The following links provide more information about Tulsa and activities happening in the area.

[Visit Tulsa](#)

[2021 Best Places to Live in Oklahoma](#)

[Why I love Tulsa: Moms from the Tulsa area tell why they love living in Tulsa](#)

[Travel Oklahoma: Tulsa](#)

ACCREDITATION STATUS

The doctoral internship at Eastern Oklahoma VA Health Care System is fully accredited by the American Psychological Association (APA) Commission on Accreditation (CoA) with the next site visit expected in 2024. Questions related to the program's accreditation status should be directed to:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 2002
Phone: (202) 336-5979 e-mail: apaaccred@apa.org
Internet: <http://www.apa.org/ed/accreditation>

DOCTORAL PSYCHOLOGY INTERNSHIP

During the 2023 - 2024 training year, the EOVAHCS's Psychology Internship Training Program will provide training for 4 full-time psychology interns. The program is a 12-month, full-time appointment. All interns complete at least a total of 2080 hours of training. The usual tour of duty is 8:00am – 4:30pm, although some training experiences may involve a different schedule due to specific activities on that rotation (e.g. evening groups; outreach activities). Certain clinical rotations will offer experiences outside of the usual tour of duty, however, there are no mandatory after-hour expectations. As this is a training year, emphasis is placed on competent completion of training activities rather than the number of hours worked. This means that interns may, at times, work more than 40 hours in a week. For example: When navigating a clinical crisis with a client, case consultation/supervision and the resulting medical record documentation must be completed before leaving for the day. Further, an intern may require more time to prepare for a specific competency, write reports, prepare for a presentation or complete required reading.

ABOUT THE PROGRAM

The primary aim of the EOVAHCS training program is **to provide the highest quality generalist training using evidence-based psychotherapies and psychological assessments that are inclusive of diverse cultural methodologies and critical consciousness frameworks**. Culturally responsive models and social justice principles undergird all aspects of our training program so that interns are equipped to serve BIPOC and marginalized groups who have historically and systematically been denied access to liberated spaces within mental health systems in their own communities.

Furthermore, our intention is to recruit and retain diverse interns and faculty who represent the communities that they serve. It is imperative those voices inform and shape dynamic models of multiculturalism that are intricately interwoven with scientific principles of evidence-based psychotherapies and assessment training. At the same time, we encourage critical thinking and challenges to the status quo frameworks that

are grounded in western theories that preserve white privilege and deny the legitimacy of BIPOC perspectives and ideologies. For this reason, values of social justice and equality, and liberation psychology are integrated into the training and work of our interns and faculty which is a hallmark of our training program.

The Scholar-Practitioner model is the underlying philosophy and will be followed to prepare interns as well-rounded competent clinicians. We emphasize the integration of research and practical experience and believe it is essential in the development of professional competency. Therefore, emphasis is placed on applying evidence-based practices, research-based programming, and the application of science into practice. The goal is to facilitate interns' development of critical thinking, conceptualization, and problem-solving skills. Prior to the completion of the training, interns will be expected to be competent in providing basic psychological services to Veterans in an ethical, professional, culturally sensitive, and knowledgeable manner.

The internship program is structured to help interns grow and mature both personally and professionally. Internship training is designed to promote development in two fundamental areas: achieving foundational competencies in psychological practice and developing a sound professional identity. All aspects of the training program will facilitate the development of core competencies as recommended by APA emphasizing the importance of multiple skill sets among diverse populations and in varying functional roles involved in patient care. Interns will learn to effectively communicate their observations and clinical opinions (verbal and written) in interdisciplinary settings and to develop interpersonal skills needed to work effectively with patients, their families, and allied health professionals. Interns will also have the opportunity to further develop their knowledge and sensitivity to cultural, ethical, and legal issues that impact psychological practice along with an overall understanding of individual differences.

In addition to professional competencies, the training program strives to promote positive development of the intern's professional identity. This involves multiple dimensions: Supervisors will provide modeling, feedback, and a progressive gradient of independence needed to help interns better develop a sense of themselves as an emerging professional. This involves helping the intern negotiate the transition from the student role to the professional role, particularly with respect to self-image, increasing responsibilities, the navigation of complex service delivery settings, and professional competence. Our program uses feedback and evaluations to help trainees grow in self-awareness, develop a refined sense of personal strengths and limitations, adopt culturally informed perspectives and clinical judgment with regards to when to act independently and when to seek consultation.

The training program offers a focus on mental health care for rural and remotely living Veterans and underserved Veterans. Interns will be incorporated into programs where the focus is specifically on underserved populations including working with Veterans with severe mental illness (SMI), Veterans who have experienced military sexual trauma (MST), are currently living in remote area (rural mental health), who are currently going through the court system (Veteran's Treatment Court), and who are of a minority sexual

orientation group, (LGBTQ). We also work closely with rural Native American communities in the Eastern Oklahoma area, allowing trainees to develop multicultural understanding of diverse tribes in Eastern Oklahoma and insight into the unique needs of Native American Veterans. Within the SUD Program Rotation is the opportunity to work with Native American Veterans and learn the traditional Talking Circle format of group healing within the Native American Warriors Group. There are other opportunities to be involved with traditional healing ways such as smudging ceremony, spirituality, the medicine wheel model of holistic health, and an introduction to the cultural values of the Tribal community on whose reservation that the EOVAHCS Training program resides, the Muscogee (Creek) Nation. Further, Cultural diversity immersion experiences through the Native American Heritage Event, culturally responsive supervision by a Tribal psychologist and outings to the Creek Nation Tribal Museum and Veterans Affairs are offered during the internship year.

Each training opportunity in all rotations will present the opportunity to train with a multidisciplinary team in a cooperative and professional environment along with training in evidence-based practices. Our diverse staff offers a breadth of multicultural viewpoints and experiences with a focus on Veteran-centered care, emphasis on recovery and community re-integration.

PROGRAM STRUCTURE

The Internship year is divided into two rotations of six months each and yearlong rotations focused on evidenced based assessment and therapy. In general, interns are expected to achieve foundational competencies in the area of clinical assessment, group and individual psychotherapy, consultation and treatment planning, professionalism and ethical/legal standards and policy, sensitivity to individual differences and cultural diversity, supervision and scientific knowledge and methods.

Generally, interns spend two days per week performing duties associated with their rotation, one day a week performing duties associated with assessment, one day a week performing duties associated with evidence-based therapy, and one day reserved for training-related activities, including didactic seminars, group supervision, research, supervision seminar, participation in the multicultural committee and the yearlong diversity group project. Interns have the ability to individualize their training plans as well based on the intern's training goals/interests and can include committee work (e.g., LGBTQ Committee; IPV Work Group, Mental Health Summit Planning Committee), outreach (e.g., Native American Outreach, MST Outreach) and/or participation in multicultural activities such as the Voices at the Table noted below.

Interns receive at a minimum of two hours and 30 minutes of individual supervision each week by three separate licensed psychologists (Assessment Supervisor, Rotation Supervisor, EBP Supervisor). In addition, interns have two – three hours of group supervision (Assessment, EBP, Supervision) and two hours of didactic activities each week. The didactics and seminars are coordinated by the training leadership and focus

on multicultural issues, empirically based interventions, and/or assessments. Diverse perspectives in training are provided by clinical providers working in various areas of Veteran care as well as outside speakers with specific knowledge in psychological assessment, trauma-related care, and diversity issues.

VOICES AT THE TABLE

“Voices at the Table” is a small weekly discussion group whose primary goal is to expand our hearts and minds to the rich tapestry of the American experience. One of the ways this occurs is by creating a safe, non-judgmental, and liberating place for marginalized groups to give voice to their people’s history and personal experiences. It is truly a multicultural group that is open to all staff, residents, and interns who are committed to creating a more inclusive and equitable society for all. Our discussions may stem from specific readings, a presentation, or relevant topic in the news. Please join us for a very refreshing and informative hour. We meet each Thursday during lunch. All we ask is that you bring an open and caring heart that carries within it a burning desire to make this world a better place for all.

“What do we live for, if not to make the world less difficult for each other?” – George Eliot (Mary Anne Evans)

Sample Training Structure

<p>Rotation 1 15 hours per week</p> <p>First half of internship year - 6 months</p>	<p>Rotation 2 15 hours per week</p> <p>Second half of internship year - 6 months</p>
<p>Year Long Rotations 1 Day focused on Assessment 1 Day focused on EBP Interventions</p>	
<p>Weekly 2.5 hours individual supervision One hour with Rotation Supervisor One hour with Assessment Supervisor 30 min with EBP Supervisor</p>	
<p>Weekly 2 - 3 hours group supervision One hour with EBP Supervisor One hour with Assessment Supervisors One hour with Supervision Supervisor</p>	
<p>2 hours of Didactic Seminars Weekly</p>	
<p>3 - 4 hours Group Project/Outreach/Committee Work/Misc. Activities</p>	

ROTATION DESCRIPTIONS

Each intern is required to participate in year long rotations which will focus on Psychological Assessment and Evidenced-Based Psychotherapy. These rotations are located at the Tulsa Clinic.

Personality Diagnostic Assessment & Neuropsychological Assessment

Assessment training at EOVAHCS emphasizes collaborative/therapeutic and recovery-oriented approaches throughout the testing and feedback process. Interns will either be assigned to conduct personality/diagnostic assessments and/or neuropsychological assessments based on their foundational assessment experience prior to internship. If multiple interns meet the foundational requirements for neuropsychological testing and wish to have this experience, then it is possible that the assessment year will be split with half of the year focused on neuropsychological testing and half of the year focused on personality/diagnostic testing. Therefore, this rotation will vary from cohort to cohort based on prior assessment experience.

Interns will conduct assessments in response to consult requests submitted by clinical providers anywhere within the VA network of clinics. The assessments involve clinical interview, review of history and records, and standardized psychological assessments and are specific to the referral questions. Interns will write integrated assessment reports and present this feedback to both colleagues and patients as appropriate. Emphasis is placed on collaborating with other professionals to clarify referral questions and provide meaningful feedback to both the referring clinician and the patient. Interns will have an individual assessment supervisor who provides supervision and participate in weekly assessment group supervision. Interns on the Personality/Diagnostic Testing rotation will conduct 180 minute testing sessions with the client every other week and on the off week will have that time allotted for test interpretation and report writing. As part of this rotation, interns will also have a weekly 90 minute testing clinic used for ADHD screenings, MMPI-3 administrations, diagnostic interviews such as CAPS-5 and for providing therapeutic assessment feedback. Interns on the Neuropsychological Testing rotation will conduct approximately 6 hours of testing every other week, and on the off week, they will focus on test interpretation and report writing.

Personality/Diagnostic assessment assists in differential diagnosis and treatment planning for veterans with diverse emotional and behavioral concerns. Common measures administered include: MMPI-3, PAI, MCMI-IV, WAIS-IV, CPT-3, SCID-5, CAPS-5, and various symptom screeners. Consultations to the EOVAHCS Neuropsychology Service are received from a spectrum of patient care providers with a diverse range of consult requests. Neuropsychological assessment referral reasons often include diagnostic clarification of neurocognitive versus psychiatric etiologies, and evaluating the extent of cognitive impairment in suspected dementia and in residuals of acquired injuries, such as traumatic brain injury (TBI) or stroke. Interns assigned to the Neuropsychology assessment rotation gain experience selecting, administering, scoring, and interpreting a wide variety of neuropsychological measures and personality inventories using a flexible battery approach. The majority of the assessments are

completed with veterans referred to the service on an outpatient basis, while there may be additional opportunities for brief assessment of veterans on inpatient services (i.e., psychiatry, rehabilitation).

Evidenced-Based Psychotherapy

Interns will become proficient in a minimum of two evidenced based therapies Cognitive Behavior Therapy for Depression (CBT-D) and Cognitive Processing Therapy (CPT) for PTSD during the course of their training year. Interns will complete training during orientation in CBT principles and CBT for depression and will focus on implementation once orientation is completed. Around November of the training year, interns will participate in CPT training and consultation provided by a Regional VA Trainer/Consultant. This unique training/consultation opportunity fulfills the training requirements to apply for VA or community provider status for CPT once licensed. Interns will participate in group supervision with the VA CPT consultant for CPT cases and with an EBP supervisor for CBT-D. Individual supervision will also be provided 30 minutes each week.

Rotation Options

Choice of rotations include: (Interns will choose two each lasting 15 hours per week for six months)

- General Mental Health Clinic (GMH)
- PTSD Clinical Team (PCT)
- Women's Mental Health Speciality/Sexual Trauma Treatment Program
- Substance Use Disorder Team (SUD)/Veterans Treatment Court
- Acute Inpatient Unit
- Psychosocial Rehabilitation and Recovery Center (PRRC)
- Psychosocial Rehabilitation and Recovery Center (PRRC)
- Home-Based Primary Care (HBPC)
- LGBTQ+ Program
- Primary Care Mental Health Integration (PCMHI)

In addition, rotation enhancements are potentially available contingent upon supervisor availability and intern's rotation preference and can be individualized per intern's training interests such as:

- Special Populations
- Specialty Assessment
- Rural Telemental Health
- Administration
- LGBTQ+ Program
- DBT Team
- Multidisciplinary Eating Disorder Team

Rotation Descriptions:

General Mental Health: Interns will work as part of an interdisciplinary outpatient clinic, seeing veterans with a full spectrum of psychological disorders including schizophrenia, non-combat PTSD, bipolar disorder, depression, and anxiety. Psychological work in the clinic includes individual and group psychotherapy, as well as participation in the initial treatment planning process for veterans. The intern would have the opportunity to develop and enhance skills in evidence based psychotherapy by participating in both group and individual therapy with a broad range of psychopathology. Skills in differential diagnosis and treatment planning are facilitated through working with veterans with a diverse range of presenting concerns and knowledge base regarding psychotherapy. In this clinic a holistic, recovery-oriented approach to care is taken so interns work closely with medication providers (nurse practitioners, physician assistants, and psychiatrists) and social workers (homeless veteran coordinator, CWT and supported employment coordinator), as well as collaborating with primary and specialty care physicians.

Acute Inpatient Unit: The role of psychology on the inpatient unit includes, psychological assessment, provide brief psychotherapy, group therapy, psychoeducation and consultation to a multi-disciplinary team. Common reasons for hospitalization include suicide ideation/attempts, homicidal ideation, substance use disorders, depression, grief and loss, active psychosis and/or mania. A large focus of the rotation is consulting and communicating about treatment conceptualization and planning with the team, which includes nursing, recreational therapy, social work and psychiatry staff.

Psychosocial Rehabilitation and Recovery Center (PRRC): In PRRC, interns are part of a recovery focused program for Veterans who have persistent severe mental illness including Schizophrenia, Schizoaffective Disorder, Bipolar Disorder, Severe Depression, and PTSD. The goal of the PRRC is community integration, reducing emotional distress with evidenced based therapeutic interventions, and building skills to strengthen social supports. The intern is expected to provide psychological assessment, individual, and group interventions to veterans with serious mental illness as part of an interdisciplinary team. The team includes the following disciplines: Vocational Rehabilitation, Recreational Therapist, Peer Support Specialist, Social Work, and Psychologist. Evidenced based practices include: Seeking Safety, CBT for Depression, CBT for Anxiety, Mindfulness, Cognitive Behavioral Therapy for Schizophrenia, Dialectical Behavior Therapy, Cognitive Processing Therapy, and Social Skills Training for Schizophrenia.

PTSD Clinic: Interns will gain experience in empirically supported assessment and treatments of PTSD related to combat. Evidenced Based Psychotherapy training opportunities include: Cognitive Behavioral Therapy (CBT) Skills Groups, Cognitive Processing Therapy (CPT), CBT for Insomnia, and Prolonged Exposure Therapy. Interns will learn to reliably administer and score the Clinician Administered PTSD Scale (CAPS-5). Training focus will be individualized based on intern's past training, experience, and interest.

Women's Mental Health Specialty/Sexual Trauma Treatment Program: Interns will gain experience in empirically supported assessment and treatments for women veterans and men and women veterans who have experienced any type of sexual trauma. Frequent diagnoses treated on the team include PTSD related to sexual trauma in the military (MST) and outside the military, Borderline Personality Disorder, Major Depressive Disorder, and Anxiety Disorders. Interns also have the opportunity to gain exposure working with individuals with eating disorders, experiencers of intimate partner violence (IPV), and users of IPV. Evidenced Based Psychotherapy training opportunities include: Cognitive Behavioral Therapy (CBT) Skills Groups, Acceptance and Commitment Therapy (ACT), Skills Training in Affect and Interpersonal Regulation (STAIR), Dialectical Behavior Therapy (DBT) Skills Groups; Cognitive Processing Therapy (CPT), CBT for Insomnia, Mindfulness, Exposure Relaxation Rescripting Therapy for Trauma Related Nightmares (ERRT), Interpersonal Therapy for Depression, Cognitive Behavioral Therapy for Depression and Prolonged Exposure Therapy. Interns will learn to reliably administer and score the Clinician Administered PTSD Scale (CAPS-5). Training focus will be individualized based on intern's past training, experience, and interest.

Substance Use Disorder Team: The Eastern Oklahoma VA Health Care Systems (EOVAHC) Behavioral Medicine Service (BMS) offers a "continuum of care" model for Veterans diagnosed with Substance Use Disorders (SUD) and Co-Occurring Disorders providing interns the opportunity to individualize their training experience. A strong clinical focus would provide interns with experience in Substance Use Disorder assessment, consultation, evidence based therapies, outpatient and intensive outpatient (IOP) groups and may also include inpatient consultation. Evidence Based practices include Motivational Enhancement Therapy, Mindfulness, Seeking Safety, 12-Step Facilitation, a Cognitive Behaviorally focused Relapse Prevention and Acceptance Commitment Therapy approaches.

Tulsa Veterans Court (VTC) targets veterans charged with non-violent felonies and who also struggle with drug and/or alcohol addictions, and/or mental health problems. The Veterans Treatment Court is a collaborative effort among the 14th Judicial District Tulsa County Drug/DUI Court, U.S. Department of Veterans Affairs, Tulsa County District Attorney's Office, Tulsa County Public Defender's Office, Human Skills and Resources Supervision, Tulsa County Court Services, and many other community partners. Tulsa Veterans Court is certified as a National Training Mentor Court.

Interns will have the opportunity to attend court dates, graduations and provide counseling services and case management to VTC participants. Interns on the SUD rotation will also have the unique opportunity to be trained by and consult with a National Trainer/Consultant in CBT-SUD.

Home Based Primary Care Rotation: Interns will have the opportunity to learn how to effectively provide a full range of psychological services to patients in the home who are unable to travel to the nearest VA Medical Center. Many of those served are in very rural areas of Eastern Oklahoma, which will add to this unique training experience.

Specific services include screenings; psychological, cognitive, and capacity assessments; psychotherapy; and prevention-oriented services. Mental health treatment and prevention-oriented services will emphasize evidence-based and best practice approaches.

LGBTQ+ Program: As part of this rotation, interns get the unique opportunity to gain more exposure and in depth training and supervision working with individuals in the LGBTQ+ community. Opportunities on this rotation include conducting evaluations needed for gender affirming surgery along with individual and group therapy experiences. Interns will take part in co-facilitating the Sexual Orientation and Gender Identity Health Education Group which is an empirically supported intervention along with leading process/support groups for those who identify as Lesbian, Gay, Bisexual, or Questioning and those who identify as Transgender. Interns on this rotation will participate in the LGBTQ Committee and assist with planning awareness and outreach activities. Further, interns will work closely with the LGBTQ Coordinator providing consultation and training to staff across the EOVAHCS. This can be a standalone rotation or a rotation enhancement.

Primary Care Mental Health Integration (PCMHI): Interns will have the opportunity to provide evidence based behavioral health services to patients within the primary care setting. Interns will work in collaboration with primary care physicians, nurses, and other PCMHI social workers and staff to provide integrated services that treat the *whole* person. Interns will be trained to complete brief assessments, interventions, and treatment plans for primary care patients presenting with a number of behavioral health concerns including mental health (grief, depression, anxiety, etc.) and physical health concerns (diabetes, hypertension, obesity, etc.). Interns will also submit referrals and coordinate care for higher level need patients to specialty clinics such as to the inpatient unit, combat- related PTSD treatment clinic, eating disorder program etc. PCMHI not only aims to reduce symptoms of psychopathology, but to also improve patient functioning and increase quality of life. The rotation emphasizes a contextualism perspective to case conceptualization and the implementation of contextually and behaviorally based psychotherapeutic interventions.

Rotation Enhancements

Rural Telemental Health: The Rural Telemental Health (RTH) rotation will offer interns distinct and innovative training using technology to complement their psychotherapy, psychological evaluation, consultation, and interprofessional skills. Interns can expect to work towards decreasing health disparities in an interprofessional training model serving rural Oklahoma veterans from Vinita, Idabel, and McAlester CBOCS in partnership with social work, psychiatry, and primary care using video teleconferencing. They will learn the unique combination of economic, social, and cultural factors affecting rural veterans. As a result of socio-eco-cultural influences, many of our rural veterans have multifactorial medical and mental health issues; therefore, interns will acquire advanced skills and knowledge in assessment, evaluation, psychotherapy, consultation, and case management.

Special Populations: This rotation enhancement will specialize in providing therapeutic services to Veterans from minority populations including: racial/cultural differences, LGBTQ, women, and Veterans in the legal system. As psychologists, we are tasked with the ethical responsibility of providing culturally informed and appropriate treatments for our clients and the communities with which we engage. However, clinicians often cite concerns about their abilities to apply knowledge of diversity to daily practice. This rotation enhancement will provide interested interns an opportunity to bridge the gap between knowledge and application. The Special Populations Rotation Enhancement is designed to be flexible, allowing interested interns an opportunity to create an experience fitting with personal and professional goals, prior training experience, and expectations

Specialty Assessment: This rotation enhancement will specialize in providing assessments such as bariatric evaluations, organ transplant evaluations, and possibly if available, evaluations conducted for our VA Police. Interns will get the opportunity to receive enhanced training in these specialty assessments/evaluations in regards to administering of standardized assessment instruments, psychosocial interview, interpretation, and report writing.

Administrative Enhancement: The administrative enhancement provides the opportunity for interns to practice administrative functions as they relate to mental health. For example: Intern may assist with National VA mental health directives such as SMI ReEngage (outreach to Veterans with SMI who have been lost to care), EPIC (Early Psychosis Intervention Coordination), Inpatient Recovery Transformation Meeting (Review of recovery oriented practices on the inpatient unit) and local efforts such as the Complex Care Committee (Multidisciplinary team reviews of complex patients) and other systems as they arise. This rotation will develop an interns reflective and critical thinking skills, writing skills, navigation of systems/organizations and program development/improvement.

DBT (Dialectical Behavior Therapy) Treatment Team: Interns have the opportunity to add this rotation enhancement to their training year. Interns will be a part of either the Men's or the Women's DBT Team which will include at minimum a full day training in DBT, an individual DBT therapy client slot that the intern will keep filled throughout the training year, participation in the weekly DBT Consultation Meeting, and possible participation in co-facilitation of a DBT Skills Group when available and when it works with the intern's schedule.

Multidisciplinary Eating Disorder Team: Interns who elect to participate with the eating disorder team will have the opportunity to work within the context of a multidisciplinary team to provide care for men and women with eating disorders. As part of this team, interns will learn how to conduct gold-standard assessment of eating disorder symptomology, to develop individualized treatment plans that consider eating disorder severity and presence of mental health/medical comorbidity, and will be trained in the delivery of outpatient evidence-based group and individual treatment for eating

disorders including anorexia nervosa, atypical anorexia nervosa, bulimia nervosa, and binge eating disorder. Trainees will receive exposure to eating disorder best practices with an emphasis on collaborative care among mental health, medical and nutrition experts. Interns participating with the Eating Disorder Team will have the opportunity to take part in didactic trainings offered through the Office of Mental Health and Suicide Prevention's Eating Disorder Initiative, to receive national training in CBT-Enhanced, and to develop specialty knowledge in eating disorder care.

Other Training Opportunities Across Rotations:

Evidenced Based Therapies: Interns will also have the unique opportunity to be exposed to other evidenced based therapies implemented on their rotations. The following is a list of Evidenced Based Therapies currently utilized by psychologists with provider status in that specific modality.

Cognitive Processing Therapy (CPT): CPT is a manualized, cognitive-behavioral, time-limited (12-17 weeks) treatment approach for trauma related symptoms. This therapy is provided in both individual and group therapy formats.

Prolonged Exposure Therapy (PE): PE is a manualized, cognitive-behavioral time-limited (10-15 weeks) treatment approach for veterans with a diagnosis of PTSD. This therapy is provided in individual format only.

Motivational Interviewing/Motivational Enhancement Therapy (MI, MET): MI and MET are client centered therapeutic styles for eliciting behavioral change. These are used frequently with patients with Substance Use Disorders.

Dialectical Behavioral Therapy Skills Group (DBT): DBT is a manualized approach focusing on the skills of mindfulness, interpersonal effectiveness, emotion regulation, and distress tolerance.

Acceptance and Commitment Therapy (ACT): ACT uses acceptance and mindfulness processes along with commitment to behavioral change to bring about greater psychological flexibility.

Cognitive-Behavioral Therapy for Depression (CBT-D): CBT-D focuses on cognitive restructuring along with behavioral activation to treat depressive symptoms. This is available in group and individual format.

Interpersonal Therapy for Depression (IPT): IPT is based on the principle that there is a relationship between the way people communicate and interact with others and their mental health. This therapy encourages the patient to regain control of mood and functioning typically lasting 12–16 weeks.

Cognitive-Behavioral Therapy for Insomnia (CBT-I): CBT-I focuses on cognitive restructuring and behavioral changes to treat insomnia. This is available in group and individual formats.

Cognitive-Behavioral Therapy for Chronic Pain: This is a manualized, time-limited (12 weeks) that focuses on CBT skills for pain management. This is available in group and individual formats.

Exposure, Relaxation, and Rescripting Therapy (ERRT): This is a manualized, time-limited (5 weeks) cognitive-behavioral therapy for the treatment of trauma related nightmares. This is available in group and individual formats.

Social Skills Training: Evidenced based treatment for veterans with severe mental illness. This is available in group format.

Integrated Behavioral Couples Therapy (IBCT): This is a couple therapy that incorporates the strategies of behavioral couple therapy with new strategies for promoting acceptance in couples. Studies indicate that IBCT is an effective intervention for reducing marital distress and improving relationship satisfaction.

Collaborative Assessment and Management of Suicidality (CAMS): CAMS is a therapeutic framework for suicide-specific assessment and treatment of suicidal risk. The clinician works collaboratively with the patient to identify suicidal “drivers” and to understand how suicidal thoughts and behaviors function as coping strategies.

Cognitive Behavioral Therapy for Binge Eating Disorder: This individual and/or group therapy focuses on helping individuals suffering from recurrent episodes of emotional or binge eating and will include education about the causes and consequences of binge eating, as well as specific strategies to use in order to start developing a healthier relationship with food and eating.

Recovery from IPV through Strengths & Empowerment (RISE): RISE is an evidence-based, trauma-informed intervention for individuals who have experienced or are currently experiencing intimate partner violence (IPV). This intervention takes place in the context of individual therapy and is designed to be flexible in nature, lasting anywhere between 1 to 8 sessions. RISE utilizes a Motivational Interviewing framework and specifically targets self-efficacy which is often eroded by IPV. Veterans are empowered to set individual recovery goals and can choose from a variety of modules each session to specifically address their own unique needs. Topics that can be covered include safety planning, health effects and warning signs of IPV, improving self-care and coping, enhancing social support, sexual violence over the life span, making difficult decisions, and building resources moving forward.

SUPERVISION

The EOVAHCS has an active training team with 19 licensed doctoral level psychologists available as supervisors for the internship program. All supervisors have regular and weekly times for individual supervision. All Interns have at least three individual supervisors throughout the course of the year (Assessment, Rotation, EBP) and meet one hour per week with EBP group supervision, one hour per week for assessment group supervision and one hour per week for supervision seminar which starts closer to the end of the first quarter of the internship. Thus a *minimum* of 2.5 hours of face-to-face individual supervision and two - three hours of group supervision is provided each week by a licensed psychologist. Further, interns participate in direct observation and feedback, modeling, case review, co-treatment with a supervisor, treatment team meetings, team huddles and “as needed” consultation/supervision (with supervisors, other psychology staff, and treatment team staff).

SUPERVISION SEMINAR

EOVAHCS Training Program provides the opportunity for interns to gain experience supervising trainees including psychology and social work graduate students and psychiatry residents in individual and group formats over the course of the year. A weekly seminar provides a variety of experiences for beginning supervisors including: didactic presentations, discussions of readings, review of video depictions of supervision models, role-play exercises and real supervision experiences of interns and faculty. The seminar will serve to facilitate an understanding of basic functions and roles of clinical supervision, ethical and cultural diversity considerations which will be integrated across activities. Content will include specific theory, supervisor interventions and a range of topical and situational considerations.

Individual umbrella supervision is most likely to begin after the first quarter of the training year when interns have demonstrated competency in the nine domains. Individual umbrella supervision may be possible for both therapy and assessment experiences depending on rotation and number of active practicum students. Assessment supervision will be conducted both individually and in a group setting to facilitate high quality practice with interviewing, chart review, test selection, administration, scoring, interpretation, report writing and providing feedback.

Supervision experiences for interns during the training year are contingent upon rotation options, numbers of active practicum students and intern competencies as demonstrated by their informal and formal evaluations.

INTERN DIDACTICS

EOVAHCS Didactic Seminar takes place weekly for the duration of the training year and covers a broad range of topics addressing specific competencies and multiple roles of the contemporary psychologist. Didactics and seminars are coordinated by training leadership and focus on multicultural/diversity considerations, ethics, professional

development, supervision, empirically based treatments, and psychological assessment. Didactics are provided by psychology staff, community partners, consultants, presentations by interns. Additionally, Behavioral Medicine Service holds monthly staff meetings, professional development and case consultation meetings. Our psychology discipline also holds a Quarterly Psychology Seminar which is a full afternoon of education. Further, the VA provides a variety of trainings throughout the year that are available for interns to attend based on interest and approval from their supervisor and Training Director.

DIVERSITY SEMINAR AND GROUP PROJECT

The Diversity Seminar and Group Project strives to foster and encourage a life-long practice of professional multicultural competence. The interns and seminar facilitators work to embrace the idea of cultural humility and develop a process of openness, self-reflection and ongoing professional and personal development. Aspects of the project include: participation in culturally considerate supervision, delivery of culturally competent clinical interventions, encouragement of reflection on cultural identity and cultural interactions in professional spaces through personal reflective practice, group discussion, and facilitation of experiential encounters that increase awareness of cultural identity and interactions, as well as knowledge of a cultural group.

As part of the diversity seminar, interns will create individual and group presentations. First, each intern will present on an aspect of diversity in a formal presentation and facilitate discussion. The individual presentation could highlight an experiential project, deep self-reflection, or exploration of a particular case and include relevant research/literature. In the later part of the training year, interns present as a group on a topic of their choosing, related to diversity, as part of the quarterly psychologist training seminar.

Lastly, interns will be active participants in the **multicultural committee** which meets monthly. The Multicultural Committee includes members from Behavioral Medicine Service, Chaplaincy, The Veterans Center, and the office of the EEO Manager, to name a few. The committee was conceived as a catalyst for diversity and equality in the Psychology Internship Program. We held a vision to shift the existing theoretical paradigm that maintains the status quo to one that is inclusive of all people, as well as culturally and socially responsive to the needs of marginalized communities we serve. The end goal was for the work being done by the committee to infiltrate and transform services facility wide. We are seeing this come to fruition.

Over the years since conception, the Multicultural Committee has evolved in scope and reach. The committee writes monthly articles for the facility to showcase diversity among our Veterans and Military service members, and for special observances such as National African American History Month, LGBT Month and National Hispanic Heritage Month. Because EOVAHCS sits on the Muscogee (Creek) Nation land, and Oklahoma has more Tribes than any other state, and we have placed special emphasis on serving our Tribal Veterans, we celebrate National Native American Heritage Month

with an event organized and hosted by the Multicultural Committee. Dignitaries from the Tribes, Tribal programs, storytellers, Tribal hymn singers, and other presenters participate in the Native American Heritage Event. Traditional food, special speakers, poster presentations, and honoring Tribal Veterans are included in the celebration. The event is the highlight of the committee's year and one that we look forward to with great excitement.

Other activities of the committee include discussions around racial inequality; macro and microaggressions; local and worldwide current events impacting marginalized groups; outreach activities; and articles, publications, and resources that address discrimination and social injustice. Notice of culturally responsive webinars and challenges to western psychological theoretical frameworks are also shared. Our intention is to open liberated spaces for BIPOC perspectives and indigenous approaches to have a voice. Our committee members are also an integral part of the diversity seminars, immersion experiences/diversity outings, and "Voices at the Table" discussions.

Interns can engage in a holistic experience of diversity, equity, and inclusion through these interconnections of the program. Further, faculty and interns alike are empowered to provide governance and critical feedback on how well our training advances diversity, equity, and inclusion. Their feedback contributes to the continuous transformation of our training program and helps us to progress with each intern class.

CONTINGECNY PLANNING FOR GLOBAL PANDEMIC

The COVID-19 pandemic has created numerous personal and professional challenges for us all. One of these challenges is uncertainty about what will happen next week, next month, or throughout the year. The EOVAHCS Internship has made every attempt and will continue to work hard to ensure interns have meaningful training experiences in spite of difficulties associated with the pandemic. We strive to be transparent at all times; however, we are not able to predict how specific rotations or training opportunities may evolve during the year.

Interns are trained on all telehealth modalities, policies, procedures, assessment and treatment during orientation. These procedures are to be fully implemented in the event quarantine measures are engaged due to the COVID-19 or other health pandemic. All orientation activities, didactics, and supervision can be provided via virtual means if needed. Interns are provided with VA laptops which enable them to log onto the EOVAHCS network remotely.

The EOVAHCS has the ability, if necessary, transition all psychology trainees to full-time telework while maintaining virtually all training activities without significant disruption. Specifically, trainees continue to see veterans via telehealth for individual therapy, group therapy and limited assessment. Interns continue attending and participating in didactics and supervision via virtual media technologies, and engage in live, direct observation of clinical care by supervising psychologists.

Direction to work from home is a decision that will be made with consultation from training program and facility leadership and the Designated Education Officer. Note: Interns are considered paid employees of the VA for the internship year and are expected to follow policies that apply to VA staff during the COVID-19 pandemic. Further, interns must be deemed competent to provide telehealth care from home by supervisors prior to this being an option. Supervisors will work to conduct a minimum of 2 live observations of telehealth sessions during the first six weeks out of orientation in addition to testing knowledge of telehealth policy during supervision to ensure competence.

The training program is still exploring options for virtual/remote psychological testing if in person operations are suspended during the training year; however, the training committee is committed to ensuring the interns participate in activities to ensure assessment competency is met. However, the health and safety of our Psychology Trainees and competent care of our nation's veterans, is of utmost importance to us. We will continue to provide high quality training in professional psychology while simultaneously keeping our trainees' health and wellness at the forefront.

STIPEND APPOINTMENT – DOCTORAL PSYCHOLOGY INTERNSHIP

The current stipend for full-time VA Interns is \$26,297.00, paid biweekly throughout the annual appointment period. Currently, this stipend is subject to Federal Income Tax withholding. Recent changes have now mandated that Interns be classified as full-time employees, making them eligible for health insurance. Interns are not eligible for participation in the VA retirement programs.

The Internship is a full-time, one-year appointment and will start on Monday July 31, 2023. Under the federal sick leave/annual leave program, Interns accrue 4 hours of paid sick leave and 4 hours of paid annual leave (vacation) every 2-week pay period. This equates to approximately 13 days of sick leave and 13 days of annual leave over the course of the Internship year. Interns are also allowed to take up to three days of paid Authorized Absence (AA). This time can be used for post doc or job interviews, returning to their academic program for meetings related to dissertation or research, graduation ceremony, or educational activities of interest such as conferences that are not a part of the internship program. These days can only be used with prior supervisor and TD approval. In addition, there are now 11 Federal Holidays with the recent inclusion of June 19th. Leave time may not be used as an extended block during any one rotation. Instances in which the one-year period needs to be extended because of illness or other extenuating circumstances will be addressed individually by the Training Committee. Any approved extension of the one-year training period would occur without funding.

APPLICATIONS

Applicant Eligibility:

Applicants for Internship must have advanced standing in a clinical or counseling psychology doctoral program accredited by the American Psychological Association. We do not review applications of students from programs currently on probationary status with APA. All applicants must receive the written endorsement of their program Training Director as having completed all departmental requirements for Internship eligibility. This is expected to include all coursework and qualifying examinations with at least initial progress toward the dissertation/research project. Applicants should have a reasonable certainty of completing all requirements for the doctorate including dissertation defense, within one year following the start of the internship. Applicants should have at a minimum 75 supervised hours of assessment experience and 300 supervised hours of intervention experience. The Eastern Oklahoma VA Healthcare System is an Equal Opportunity Employer and encourages applications from members of minority and non-traditional groups.

If selected, the Federal Government requires male applicants to VA positions who were born after 12/31/59 sign a Pre-appointment Certification Statement for Selective Service Registration before they are employed. Male applicants are required to have registered with the Selective Service System before the age of 26.

All interns will complete a Certification of Citizenship in the United States prior to beginning the internship. We cannot consider applications from anyone who is not currently a U.S. citizen. Interns are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens. The VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are not required to be tested prior to beginning work, but once on staff, they are subject to random selection as is all other clinical staff.

One of the most misunderstood issues in this area is with regard to the recreational and medical use of marijuana (cannabis) as well as products containing THC (tetrahydrocannabinol) or CBD (Cannabidiol). Some trainees assume that having a prescription for marijuana/cannabis, being matched to an internship program that is located in a jurisdiction that allows the medical/recreational use of marijuana/cannabis, or obtaining a medicine over-the-counter (e.g., CBD oils) means that their use of these substances will be acceptable to internship programs. However, VHA, which includes the Eastern OK VA Internship Program, prohibits the use of marijuana/cannabis, THC, and/or CBD in all circumstances and must terminate a trainee who tests positive regardless of medical need, the presence of a prescription, the fact that it was obtained over-the-counter, or its legal status. Match results and selection decisions are contingent on passing these screens.

Matched interns are also required to meet the essential functions (physical and mental) of the training program and to be immunized following current Center for Disease Control

(CDC) guidelines and VHA policy for healthcare workers to protect themselves, other employees and patients while working in a healthcare facility. Like the influenza vaccine, VHA mandates that all health care personnel, including Psychology Interns, be vaccinated for COVID-19. This requirement is met by verification through the intern's doctoral program Director of Clinical Training (DCT). The DCT must verify that the intern has satisfactory health to perform the duties of the clinical training program, a recent TB screen, and Hepatitis B vaccination or signed declination waivers. Please click on the following link for more detailed information on eligibility to train in a VA setting [Resources for Health Professions Trainees Coming to VA | Eligibility and Forms - Office of Academic Affiliations](#).

VA Drug-Free Workplace Program Guide for Veterans Health Administration (VHA) Health Professions Trainees (HPTs)

In 1986, President Reagan signed Executive Order 12564, Drug-Free Federal Workplace, setting a goal to prevent Federal employee use of illegal drugs, whether on or off duty. In accordance with the Executive Order, VA established a Drug-Free Workplace Program, and aims to create an environment that is safe, healthful, productive and secure.

As you should already know:

- All VHA HPTs are exempt from pre-employment drug-testing.
- Most VHA HPTs are in testing designated positions (TDPs) and subject to random drug testing.
- All VA employees appointed to a TDP (including HPTs) must sign a *Random Drug Testing Notification and Acknowledgement Memo*. The list of exempt positions (NOT TDP) is on the memo (see link below).
- All HPTs in TDPs are subject to the following types of drug testing:
 - Random;
 - Reasonable suspicion;
 - Injury, illness, unsafe or unhealthful practice; and
 - Follow-up after completion of a counseling or rehabilitation program for illegal drug use through the VA Employee Assistance Program (EAP).

Here are a few additional points:

- VHA HPTs may receive counseling and rehabilitation assistance through the VA EAP. *Contact the local VHA HR office for more information about EAP.*
- VHA HPTs will be given the opportunity to justify a positive test result by submitting supplemental medical documentation to a Medical Review Officer (MRO) when a confirmed positive test could have resulted from legally prescribed medication.

•Prior to being notified of a drug test, VHA HPTs may avoid disciplinary action by voluntarily identifying themselves to EAP as a user of illegal drugs. Disciplinary action will not be initiated if the HPT fully complies with counseling, rehabilitation and after-care recommended by EAP, and thereafter refrains from using illegal drugs.

Note: Self-identification must happen prior to being notified of a drug test. This option is no longer viable once an HPT has been selected for a drug test.

However, be aware that VA will initiate termination of VA appointment and/or dismissal from VA rotation against any trainee who:

- Is found to use illegal drugs on the basis of a verified positive drug test (even if a drug is legal in the state where training); or
- Refuses to be drug tested.

•Drug Free Workplace Program (DFWP) Helpline 1-800-967-5752

•VA, OAA Health Professions Trainee Application Forms webpage and *Random Drug Testing Notification and Acknowledgement Memo*: <https://www.va.gov/oaa/app-forms.asp>

•VA Publications: <https://www.va.gov/vapubs/o>VA Handbook 5021, Employee-Management Relations VA Handbook 5383, Drug-Free Workplace Program

Trainee Qualifications and Credentials Verification Letter (TQCVL)

Once selected for an internship position, in order to qualify for VA training, each intern must first be listed on a Trainee Qualifications and Credentials Verification Letter (TQCVL). A TQCVL from the director of the sponsoring (VA or non-VA) program must be submitted to the VA Facility Director through the VA Designated Education Officer (DEO) prior to onboarding. The TQCVL confirms that specific information has been verified by the sponsoring entity for each trainee listed. All trainees who will receive training at a VA facility must be listed on a TQCVL.

The TQCVL confirms that an intern is:

- Enrolled in or accepted into the accredited training program and has had primary source verification of appropriate qualifications and credentials as required by the admission criteria of the training program;
- Qualified, and has the required credentials, to participate in the accredited training program as agreed to by the sponsoring institution, affiliated participating institutions, and the VA;
- Compliant with all US citizenship or immigration and naturalization laws and therefore suitable to be appointed to a Federal Government position; and
- Meets the essential functions (physical and mental) of the training program and immunized following current CDC guidelines and VHA policy for healthcare workers to protect themselves, other employees and patients while working in a healthcare facility.

APPLICATION PROCESS

Our program is using the APPIC Application for Psychology Internship (AAPI) to enable you to complete one application for all sites that are participating in the APPIC uniform application process. The AAPI is available through the APPIC web site. Please go to the APPIC web site at www.appic.org for more information about accessing and completing the online application.

Please be aware that the “Academic Program’s Verification of Internship Eligibility and Readiness” form must be submitted **ELECTRONICALLY** to the Internship site by your graduate Director of Clinical Training. Instructions regarding this part of the application process are contained in the online AAPI. No mail or email application materials will be accepted. Applicants are encouraged to complete the application as early as possible so that ample time will be available for application review.

For any questions please contact:

Arena M. Mueller, Psy.D.
Director of Training
(918) 577-3699
Arena.Mueller@va.gov

Jordan Heroux, Ph.D.
Associate Director of Training
(918) 384-4587
Jordan.Heroux2@va.gov

For your application to be complete, we must receive the following materials through APPIC by November 13, 2022:

- Online APPIC Application for Psychology Internship (AAPI)
- Your Curriculum Vitae—to be submitted as part of AAPI
- Three letters of recommendation—to be submitted as part of AAPI
- Graduate school transcripts—to be submitted as part of AAPI
- Your Academic Program Verification of Internship Eligibility and Readiness Form—to be submitted by your Director of Clinical Training as part of AAPI
- Cover letter (no longer than two pages) addressing how your experiences to date and current career goals make you a good fit for the training offered at EOVAHCS and emphasizing rotations of interest
- Should you choose, you may also identify representation with an element of diversity in your cover letter
- A copy of a comprehensive psychological assessment report that you have written. Preference is for adult reports; however, we will also consider applicants with a strong skill with child/adolescent reports. Please remove any identifying and confidential material.

All applications will be reviewed by a selection committee comprised of the Director and Associate Director of Training along with at least two other training committee members. We will attempt to have applications reviewed by training staff that are a part of the applicant's identified rotations of interest. Applications are evaluated across several criteria including: grade point average, dissertation status, awards, scholarly activity, professional activities, experience with evidence based intervention and assessment, strength of letters of recommendation, quality of written application materials, and goodness of fit with the program goals and objectives. All things being equal, consideration is given to applicants representing elements of diversity, including, but not limited to, age, disability, ethnicity, gender identity, language, national origin, race, religion, culture, sexual orientation, social economic status, and military service.

Applicants who are selected for interview will be invited by email no later than December 9th, 2021. Interviews will be virtual and occur on the following dates: **December 15, 2022; January 10, 2023; and January 12, 2023.** Interviews will include a group meet-and-greet, overview of the program with training director and associate training director, a group panel of supervisors providing information on various elements of the program, rotation breakouts with supervisors, Q&A with current interns and two individual interviews with training faculty. Interview day is scheduled from 9am to 4:30pm CST. Requests to meet with specific staff are welcome.

Policies and procedures regarding internship offers and acceptance recommended by the APPIC and the Council of Directors of Clinical Training Programs will be followed for the appointment of Interns to the Eastern OK VA Healthcare System's Psychology Internship Training Program. The internship site agrees to abide by the APPIC Policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant prior to Uniform Notification Day.

Internship Admissions, Support, and Initial Placement Data

Date Program Tables are updated: 7/20/2022

Program Disclosures

Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution's affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values?	<div><input type="checkbox"/> Yes</div> <div><input checked="" type="checkbox"/> No</div>
If yes, provide website link (or content from brochure) where this specific information is presented:	
N/A	

Internship Program Admissions

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:

Our program focuses on a goodness of fit between intern goals and our training opportunities. As noted above, our primary aim of this training program is to provide the highest quality generalist training using evidence-based psychotherapies and psychological assessments that are inclusive of diverse cultural methodologies and critical consciousness frameworks. The Scholar-Practitioner model is the underlying philosophy and will be followed to prepare interns as well-rounded competent clinicians. We emphasize the integration of research and practical experience and believe it is essential in the development of professional competency. Therefore, emphasis is placed on applying evidence-based practices, research-based programming, and the application of science into practice. The goal is to facilitate interns' development of critical thinking, conceptualization, and problem-solving skills. Prior to the completion of the training, interns will be expected to be competent in providing basic psychological services to Veterans in an ethical, professional, culturally sensitive, and knowledgeable manner. All things being equal, consideration is given to applicants representing elements of diversity, including, but not limited to, age, disability, ethnicity, gender identity, language, national origin, race, religion, culture, sexual orientation, social economic status, and military service (please also refer to Application Process above).

Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:

Total Direct Contact Intervention Hours	Yes		Amount: 300
Total Direct Contact Assessment Hours	Yes		Amount: 75

Describe any other required minimum criteria used to screen applicants:

Our internship seeks students from APA accredited Ph.D. or Psy.D. clinical or counseling programs who are in good standing. Applicants must have competed at least 3 years of academic study, have completed their comprehensive or qualifying exams, and have proposed their dissertation.

Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Interns	\$26,297.00	
Annual Stipend/Salary for Half-time Interns	N/A	
Program provides access to medical insurance for intern?	Yes	No
If access to medical insurance is provided:		
Trainee contribution to cost required?	Yes	No
Coverage of family member(s) available?	Yes	No
Coverage of legally married partner available?	Yes	No
Coverage of domestic partner available?	Yes	No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	104	
Hours of Annual Paid Sick Leave	104	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes	No
Other Benefits (please describe): federal holidays (11), professional development release time		

*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table

Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2018-2021	
Total # of interns who were in the 3 cohorts	12	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	2	
	PD	EP
Academic teaching	0	0
Community mental health center	1	0
Consortium	1	0
University Counseling Center	0	0
Hospital/Medical Center	3	2
Veterans Affairs Health Care System	0	0
Psychiatric facility	0	0
Correctional facility	0	1
Health maintenance organization	0	0
School district/system	0	0
Independent practice setting	1	1
Other	0	0

Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.

EOVAHS PSYCHOLOGY TRAINING STAFF: *(listed in alphabetical order)*

EOVAHSC Psychology Internship Training Committee

CHRISTOPHER ALLEN, PH.D.

Oklahoma State University, 2017
Licensed Psychologist- Oklahoma
General Mental Health Team
LGBTQ+ Coordinator

Dr. Allen completed a Master's degree in School Guidance Counseling with certification as a Licensed Professional Counselor at Southwestern Oklahoma State University in 2010 and a doctorate in Counseling Psychology in 2017. Dr. Allen joined Southwestern Oklahoma State University faculty as a staff clinician, providing therapy to adjudicated males in a group home adventure program. Dr. Allen completed post-doctoral work with OU Health Science Center in primary care with an emphasis in child abuse and neglect. Dr. Allen joined the staff at Oklahoma City Indian Clinic as a therapist and moved on to do private practice in Norman, Oklahoma, working with the LGBTQ+ population prior to joining the Eastern Oklahoma VA Healthcare system in 2020. He is currently providing individual and group therapy with a special emphasis on LGBTQ+ mental healthcare and serving as the LGBTQ+ Veteran Care Coordinator. Dr. Allen also has a specialty clinic providing EMDR therapy.

ANN BATCHELER, PH.D.

Oklahoma State University, 2009
Licensed Psychologist- Oklahoma
BHIP Supervisor
General Mental Health Team/Specialty Assessment

Dr. Batcheler graduated from Oklahoma State University in 2009 with a Ph.D. in Counseling Psychology. Her studies emphasized cultural diversity and social justice and her dissertation assessed implicit attitudes toward gays and lesbians. She completed her pre-doctoral internship at the University of Idaho. Dr. Batcheler holds B.S. and M.S. degrees in Physical Education from Texas A&M University and an M.A. in Counseling Education from Sam Houston State University. Her post-doctoral background includes multidisciplinary interventions with families who have lost custody of their children due to substance abuse issues. She also worked with developmentally delayed adolescents and their families in a residential treatment program. She joined the Jack C. Montgomery VAMC in 2015 as an outpatient general psychologist, addressing a wide spectrum of mental health issues and is currently a BHIP Team Supervisor in Tulsa. Additional clinical responsibilities include providing psychological evaluations for candidates for bariatric surgery and organ transplants.

CHARLENE BELL, PH.D.

Palo Alto University, 2019

Licensed Psychologist – Kansas

Psychologist

Women's Mental Health/Sexual Trauma Treatment Team

Dr. Bell received her Ph.D. in clinical psychology from Palo Alto University in California in 2019. While at Palo Alto University, her research focused on interpersonal trauma, self-efficacy, and empowerment and resilience. She developed an empowerment self-defense program as a therapeutic intervention for homeless women in transitional housing who had experienced interpersonal trauma, which she provided consultation on until the program became a permanent service offering in the Behavioral Department. Dr. Bell completed her predoctoral internship and postdoctoral training at the Eastern Oklahoma VA Healthcare System. She joined the staff as a licensed Psychologist in the Women's Mental Health and Military Sexual Trauma Clinic in 2021. She has provider status for Cognitive Processing Therapy for PTSD, Interpersonal Therapy for Depression, and Cognitive Behavioral Therapy for Insomnia.

PATRICIA BYRD, PH.D.

University of Tulsa, 2009

Licensed Psychologist – Oklahoma

Program Manager

Women's Mental Health /Sexual Trauma Treatment Team

Regional CPT Trainer/Consultant

Women Veterans Mental Health Champion

Dr. Byrd received her Ph.D. in clinical psychology from the University of Tulsa in 2009. While at the University of Tulsa, she was a research lab manager for the Trauma Research: Assessment, Prevention, and Treatment Center with primary responsibilities focusing on managing randomized controlled trials involving Exposure, Relaxation, and Rescripting Therapy which is an evidenced based treatment for trauma related nightmares. Dr. Byrd completed her internship at the Federal Bureau of Prisons FCI in Fort Worth, TX. She worked after internship for the Federal Medical Center Carswell, in Fort Worth, TX as a Drug Treatment Specialist and the Suicide Prevention Coordinator working with federal women inmates. Dr. Byrd joined the staff at the EOVAHCS in 2013 as the PTSD/SUD Psychologist. She became the Military Sexual Trauma Coordinator in 2014 and created an evidenced based outpatient treatment program for male and female veterans who have experienced sexual trauma. Further, she developed and served as Director of Training for the psychology internship program from 2018 to 2022. Dr. Byrd is also currently detailed a portion of her time to OMHSP Office of Women's Mental Health. Along with being a regional CPT trainer and consultant, she also has provider status in Prolonged Exposure Therapy and DBT.

PETER C. CIALI, Ph.D.

Oklahoma State University, 2006
Licensed Psychologist – Oklahoma
Home Based Primary Care
National CBT-D Consultant

Dr. Ciali received his Ph.D. in counseling psychology from Oklahoma State University in 2006. He completed his clinical internship at Sharp Mesa Vista Hospital in San Diego, CA in 2005, with an emphasis in cognitive behavioral therapy. Dr. Ciali began his career in private practice and he joined the staff at the Jack C. Montgomery VAMC in 2009. He serves as a VACO national consultant in Cognitive Behavioral Therapy depression.

DIANE GENTHER, PH.D.

University of Kansas, 2012
Licensed Psychologist – Oklahoma
General Mental Health Team
National IPT-D Consultant

Dr. Genther received her Ph.D. in counseling psychology from the University of Kansas in 2012. She completed her internship at the White River Junction VA Medical Center, which provided a dual-focused training model in dynamic and cognitive-behavioral treatment modalities. The White River Junction VA Medical Center houses the National Center for PTSD headquarters, and her internship also included subspecialty training in the assessment and treatment of PTSD through partnership with the National Center. Following internship, Dr. Genther worked as a staff psychologist in university counseling, where supervision of practicum students and interns constituted a significant portion of her work. She returned to the VA Health Care System in 2015, and in her current position, works exclusively in Telemental Health through the General Mental Health Clinic, treating veterans at the Vinita CBOC. She is also a supervisor for the Rural Telemental Health rotation. Her clinical approach is collaborative and veteran-centered, whether utilizing an empirically-based treatment or integrating theory and technique to best address patient needs. She is a consultant for the Interpersonal Therapy for Depression VA Training Program and is excited to offer supervision in this particular EBP for interns who are interested. Her supervision approach is developmental and tailored to the specific training needs and goals of her supervisees.

LEAH HALL, PH.D

University of Minnesota, 2015

Licensed Psychologist – Oklahoma

Coordinator, Eating Disorder Team

Women's Mental Health/Sexual Trauma Treatment Team

Dr. Hall is a graduate of the University of Minnesota Clinical Science and Psychopathology Research Program, where her research focused on the use of functional MRI methods to investigate neural correlates of eating disorders and major depressive disorder. Dr. Hall completed her doctoral internship at the Jesse Brown VAMC in Chicago, IL where clinical training emphasized psychological assessment as well as evidence based treatment for PTSD, substance use disorders, and anxiety disorders. Dr. Hall joined the staff at the EOVAHCS in 2015 and is currently working with the VA's Office of Women's Mental Health as a faculty member with the Multidisciplinary Eating Disorder Treatment Initiative. She is also a VA certified provider in the delivery of DBT, PE, CBT-D, ACT-D, CPT, and RISE.

JORDAN HEROUX, PH.D.

University of Tulsa, 2016

Licensed Psychologist - Oklahoma

Women's Mental Health/Sexual Trauma Treatment Team

Acting Associate Training Director

ACT Trainer & Consultant

Dr. Heroux received his Ph.D. in Clinical Psychology from the University of Tulsa in 2016. His primary areas of specialty include collaborative/therapeutic assessment and acceptance/values-based intervention. He completed his internship at the VA Puget Sound Health Care System, American Lake Division. He also pursued postdoctoral training in VA Psychosocial Rehabilitation and Recovery with an emphasis in outpatient and residential services for trauma survivors. Dr. Heroux's theoretical orientation is primarily behavioral, with integration of client-centered motivational and values considerations and appreciation for adaptive personality traits. He has provider status in Social Skills Training (SST), Prolonged Exposure (PE), and Interpersonal Psychotherapy for depression (IPT-D). He also is a VA trainer and consultant for Acceptance and Commitment Therapy for depression (ACT-D). Dr. Heroux's supervision approach is one that strives to balance warm encouragement with constructive feedback from a behavioral, developmental, competency-based framework.

STEVEN KNIGHTEN, PSY.D.

Forest Institute of Professional Psychology, 2012

Licensed Psychologist - Missouri

SUD Clinical Team, with PTSD emphasis

Dr. Knighten completed his Master's degree in Counseling Psychology at Northeastern State University in 2005 and his doctorate in Clinical Psychology at Forest Institute of Professional Psychology in 2012. His pre-doctoral internship was at the La Frontera Psychology Consortium in Tucson, AZ where his main concentration was at the University of Arizona working with students with learning disorders, with additional rotations in substance use disorder treatment and psychological testing. Dr. Knighten started at the Waco/Central Texas VA in 2017 as the lead for the substance abuse treatment program. In 2019 he transferred to the Stillwater, OK clinic under the Oklahoma City VA where he was the first in person mental health therapy provider. Dr. Knighten transferred to the Tulsa/EOVAHCS clinic in 2021 to become the new SUD/PTSD Psychologist. He has a special interest in Cultural Diversity issues including advocating for marginalized populations, and he is a member of the Tulsa VA BMS Multicultural Committee. Dr. Knighten is a US Army Veteran and enjoys working to serve his fellow Veterans.

MEGAN MCARTHUR, PSY.D.

Wheaton College 2019

Licensed Clinical Psychologist – Colorado

Graduate Medical Education (GME) Expansion Project Director

Neuropsychologist

Dr. McArthur began working at the Eastern Oklahoma VA Health Care System in 2020 in a liaison role dedicated to improving interprofessional clinical training and academic affiliate relations. She conducts neuropsychological assessment and is engaged in assessment supervision. She completed a Doctor of Psychology degree with a concentration in Neuropsychology at Wheaton College near Chicago in 2019, followed by a postdoctoral fellowship in Clinical Neuropsychology at the consortium of University of Oklahoma Health Sciences Center and Oklahoma City VA Health Care System. Prior to completing her graduate studies, Dr. McArthur was employed by the Veterans Benefits Administration and made rating decisions on veterans' claims for service-connected disability benefits. She was previously employed in an inpatient psychiatric unit and in group homes for adults with developmental disabilities in Cleveland, Ohio. Her research interests include the impact of emotional trauma on development and cognition and the person-centered application of neuropsychological recommendations.

MICHAEL MCKEE, PH.D.

Oklahoma State University, 2003
Licensed Psychologist, Oklahoma & Kansas
BHIP Supervisor
General Mental Health Team

Dr. McKee works in General Mental Health. His specialty is CBT for chronic pain patients. He is also trained in CPT for veterans with PTSD. Due to his extensive background in working with incarcerated and court ordered populations, he is often referred patients with anger management problems. Dr. McKee received his Ph.D. in Counseling Psychology from Oklahoma State University (2003) and a Master's Degree in Community Counseling from the University of Oklahoma (1986). His undergraduate degree is from Southwest Missouri State University with an emphasis in communication and religious studies. Dr. McKee's focus in graduate school was the relationship of negative self-schemas to partner attachment styles among male batterers. His previous work experiences include call-in chaplain for Norman Regional Hospital, volunteer chaplain for the support group Parent's Responding to Infant Death Experience, program director for MENder's court ordered anger management program, therapist and student supervisor on the residential sex offender treatment program at Joseph Harp Correctional facility, and program director and group therapist for court ordered substance abuse patients at Prairie View, Inc. in McPherson, KS.

ARENA MUELLER, PSY.D.

Adler School of Professional Psychology 2006
Licensed Clinical Psychologist – Ohio
Certified Alcohol and Drug Counselor – Illinois
Licensed Clinical Professional Counselor- Illinois
Acting Director of Training
ACT Trainer & Consultant

Dr. Mueller completed a Master's Degree with emphasis in substance use disorder at the University of Missouri-Kansas City in 2000. She completed her doctoral work at the Adler School of Professional Psychology in Chicago in 2006. Dr. Mueller has four years' experience working as a psychiatric emergency therapist in community hospital emergency rooms in the greater Chicago area and was an emergency responder to the 2008 shooting at Northern State University in Illinois. She has four years of experience working University Counseling Centers in Missouri, Texas and Ohio where supervision of practicum students and interns was a major responsibility. In 2009 she began working at the Eastern Oklahoma VA Healthcare system where she has primarily worked in roles that address Posttraumatic Stress, Substance Use Disorder and the use Evidence Based Therapeutic approaches.

HEATHER RANGER KOBEL, PH.D.

Oklahoma State University, 2002

Licensed Psychologist – Oklahoma

Home Based Primary Care Psychologist

Dr. Ranger Kobel , works as a clinical psychologist and staff psychologist in the Home Based Primary Care Program. She received her Master's degree in Clinical Psychology from Emporia State University in 1998. Dr. Ranger Kobel joined the United States Air Force in 2001 and completed her residency in Clinical Psychology at Wilford Hall Medical Center, Lackland Air Force Base, Texas in 2002. That same year, she graduated with her Ph.D. from Oklahoma State University. Upon completion of her Air Force residency program, Dr. Ranger Kobel served four additional years as an Air Force Clinical Psychologist. Upon completion of her service in the Air Force in 2006, Dr. Ranger Kobel worked in private practice and as an adjunct professor at Oklahoma State University. In 2007, she was hired as an Outpatient Clinical Psychologist at The Eastern Oklahoma VA Healthcare System. Dr. Ranger Kobel served in that capacity until March of 2016, at which time she joined the Home Based Primary Care team. She also continues to maintain a private practice and has acted as a clinical supervisor for doctoral practicum students for Oklahoma State University.

ALYSSA RIPPY, PH.D.

University of Tulsa, 2007

M.A. Industrial Organization Psychology

Licensed Psychologist – Oklahoma

PRRC Program Coordinator

Dr. Rippy serves as the Program Coordinator of the PRRC, based at the Behavioral Medicine Clinic in Tulsa. She provides evidence based therapeutic interventions to Veterans with severe mental illness within a recovery-based framework. Prior to working with the PRRC, she served as the Program Coordinator for the Acute Psychiatric Unit at the Jack C. Montgomery VAMC. Dr. Rippy was recognized by the University of Tulsa with an award for *Excellence in Clinical Supervision* in 2012. She has coordinated the psychology practicum program for seven years and has provided individual supervision to pre-doctoral students as well as VA Psychologists who are under supervision for licensure. Dr. Rippy has focused the majority of her research on the relationship between PTSD and increased paranoia among combat Veterans as well as examining the effects for perceived discrimination on mental health.

JOHNNA SMASAL, PH.D.

University of Tulsa, 2006

Licensed Psychologist – Oklahoma

Home Based Primary Care Psychologist

Dr. Johnna Smasal earned her Ph.D. in Clinical Psychology from the University of Tulsa in 2006. Dr. Smasal completed her pre-doctoral internship at Northeastern Oklahoma Psychology Internship Program and worked in private practice with special emphasis on trauma related evaluations and interventions. She served as Director of Operations for a children's residential program in the Tulsa area. She has a strong background in supervising postdoctoral residents and pre-doctoral interns. She joined the team in December as the Intimate Partner Violence Assistance Program Coordinator and transitioned to HBPC in 2021.

RIVER SMITH, PH.D.

University of Tulsa, 2008

Licensed Psychologist – Oklahoma

Associate Chief of Staff of Research

PTSD Clinical Team

CBT-I Consultant

Dr. River Smith earned her PhD in Clinical Psychology from the University of Tulsa in 2008. Dr. River Smith completed her pre-doctoral internship and postdoctoral fellowship in Primary Care Mental Health at the University of Oklahoma Department of Psychiatry and Behavioral Sciences as VA funded trainee. Her clinical and research interests are in the area of combat stress, risk, resilience and PTSD. She has worked on the Posttraumatic Stress Disorder Clinical team serving Iraq and Afghanistan veterans at this facility since 2009. She is certified in Prolonged Exposure Therapy, Cognitive Processing Therapy and Cognitive Behavioral Therapy for Insomnia.

ELISE BERRYHILLTAYLOR, PH.D.

University of Oklahoma - 1998

Licensed Clinical Psychologist - Oklahoma

Program Manager

Substance Use Disorder and Veterans Treatment Court

CBT-SUD Consultant

Elise Berryhill Taylor, Ph.D. is responsible for the management of the Eastern Oklahoma VA Health Care System (EOVAHCS) Substance Use Disorder (SUD) and Veterans Treatment Court (VTC) Programs. The VTC Program provides training to other court systems seeking to develop their own Veterans treatment court. She supervises the justice outreach activities of the Readjustment Counselor/VTC Liaison and Veterans Justice Outreach Coordinator positions. In addition to the justice programs, Dr. Taylor manages the Substance Use Disorder program. These services consist of an intensive outpatient program; residential treatment and detoxification; outpatient/aftercare; intake and assessment; medication-assisted therapies; smoking

cessation; SUD/PTSD treatment; individual, family and group treatment; and case management as well as consultative services to the medical and psychiatric inpatient units at the Medical Center. She has been employed with the VA since 2005. Dr. Taylor is the Tribal Coordinator for EOVAHCS.

Prior to her VA service, Dr. Taylor was the Clinical Director for the Muscogee (Creek) Nation Behavioral Health and Substance Abuse Services for eight years. Her specialty areas include Veteran mental health and substance use disorder treatment; child/adolescent mental health; American Indian identity, historical trauma and acculturation issues. She belongs to the Ecocvlke (Deer clan) and Ocevpofo (Hickory Ground) Tribal Town. She is daughter of Hvpvtvlke (Alligator clan) and Cussetah Tribal Town. She has also worked with Alaska Natives, Oklahoma Tribes, Pueblo Tribes and Dine'. She is married to a Tribal Veteran and has two teenage sons.

DAVID WEBSTER, PH.D

University of Nebraska-Lincoln, 2002

Psychologist licensure: Arkansas

Psychology Section Chief

Lead, EOVAHCS Suicide Postvention and Grief Support Team

Dr. Webster earned a Ph.D. in counseling Psychology (2002) from the University of Nebraska Lincoln, an M.A (1997) in community counseling from the University of New Hampshire Durham, M.Div. (1981) from Gordon-Conwell Theological Seminary in S. Hamilton, MA, and B. A. (1975) in psychology from University of the Cumberland in Williamsburg, KY. Dr. Webster's professional background has been diverse to include early career experience in community mental health as a child, adolescent, and family psychologist followed by several years working with active duty Soldiers (US Army) and veterans, followed by several more years in academia as a program director in a Ph.D. program in clinical-community psychology at the University of Alaska Fairbanks. Dr. Webster's clinical interests include treating PTSD, complicated grief and moral injury. He is strong proponent and advocate of Evidence-Based approaches to delivering psychotherapy with competencies in Eye Movement, Desensitization and Reprocessing (EMDR), Cognitive Processing Therapy (CPT), and Prolonged Exposure (PE).

ASHLEY WOODS, PH.D.

University of Alaska Fairbanks/Anchorage-2018

Licensed Psychologist-Oklahoma

General Mental Health Team/Intake Psychologist

Dr. Woods received her Ph.D. in clinical-community psychology with a rural indigenous people's emphasis from the University of Alaska Fairbanks/Anchorage joint program in 2018. Dr. Woods completed her post-doctoral residency at the University of Oklahoma Health Science Center. During her post graduate work, she provided integrated healthcare services at the Oklahoma City VA south clinic and OU Children's Hospital. Dr. Woods has experience in pediatric psychology, trauma-focused CBT for children/youth, and child abuse prevention/intervention. She completed her internship

with Community Health of Central Washington in Yakima. Her clinical internship included integrated healthcare practice emphasizing the Primary Care Behavioral Health model, focused acceptance and commitment therapy (FACT), and health behavior change. Dr. Woods' primary research and clinical interests include theory and application of contextual psychotherapies, disparities in health, culturally specific definitions of pathology and wellness, and systems theory.